


Employee ID # 145605	Employee or Contractor Title Forensic Scientist III	Bargaining Unit 9	Appropriation  80000106	Unit  2530	Object  B02
Document Total:\$			Reconciliation Date:	Schedule Pay Date:	Budget FY 2013 FY 2013

		Total Private Auto Mileage								
Date	Description	Odometer Readings		Total Miles	Amount	Meals	Fares	Hotel	Other Expenses	Total Expenses
		Beginning	Ending							
12/21/12	Amherst/Sudbury Round Trip -QA Meeting	63216	63408	192	\$ 86.40					\$ 86.40
01/07/13	Amherst/Sudbury Round Trip-pick up instrument part for	65271	65463	192	\$ 86.40					\$ 86.40
									Total	\$ 172.80

**Employee's Certification:** I hereby certify under the penalty of perjury that the amounts itemized above are true and correct, were incurred by me during the performance of my official duties or the Commonwealth and conform fully with rules and regulations pertaining to employee reimbursement.

**Employee's Signature:**

Supervisor's Approval: 	Title: LA13 Sup II	Date: 1/15/13
Fiscal Verification: _____	Title: _____	Date: _____
Fiscal Approval: _____	Title: _____	Date: _____